Hsiner Company Reusable Nebulizer Special 510(k) Submission

K082009

15. 510(k) Summary

In accordance with 21 CFR section 807.92 Hsiner is submitting the following 510(k) summary.

Submitter Information

Hsiner Company, LTD

No.312, Jhongshan Rd., Shengang Township,

AUG 2 2 2008

Taichung County 429

Taiwan, ROC

Phone: +86-4-25152480

Registration No.:

3003862188

Owner/Operator No.: 9053474

15.2. Name of Device

Proprietary Name:

Nebulizer Bottle

Common Name:

Nebulizer

Classification Name: Nebulizer (direct patient interface)

Product Code:

CAF

Regulation Number: 868.5630

Device Class:

15.3. Substantially equivalent to:

Hsiner Jet Nebulizer (K052811)

Hsiner Bottle (K070948)

15.4. Description of the device

The Hsiner's nebulizers are used to administer various aerosol treatments in both the homecare and hospital settings. They are intended to only be use with FDA-approved drugs upon the specific direction of a physician. These devices neither uses specific drug nor is it distributed with such drugs.

These nebulizers generate respirable sized aerosols that are delivered directly to the patient for breathing. The nebulizer operates on a compressed gas source which draws liquids from a refillable Jar by the venturi principle and aerosolizes it into respirable particles by impaction and baffling.

15.5. Intended Use of the Device

The Hsiner's nebulizers are used to administer various aerosol treatments to adult and pediatric patients in both the homecare and hospital settings. This device is intended for use only with FDAapproved drugs upon the specific direction by a physician. Its use is indicated whenever a physician or healthcare professional administers or prescribes medical aerosol products to a patient using a Small Volume Nebulizer.

15.6. Comparison to Predicate Devices

The Hsiner Reusable Nebulizers are equivalent in design and performance to the Hsiner's Jet Nebulizer and Nebulizer Bottle.



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

AUG 2 2 2008

Hsiner Company, Limited C/o Mr. Tom Shanks Principal MDventures 29201 Via Norte Temecula, California 92591

Re: K082009

Trade/Device Name: Hsiner Nebulizer Bottle

Regulation Number: 868, 5630 Regulation Name: Nebulizer

Regulatory Class: II Product Code: CAF Dated: July 10, 2008 Received: July 15, 2008

Dear Mr. Shanks:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Center for Devices and Radiological Health's (CDRH's) Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding postmarket surveillance, please contact CDRH's Office of Surveillance and Biometric's (OSB's) Division of Postmarket Surveillance at 240-276-3474. For questions regarding the reporting of device adverse events (Medical Device Reporting (MDR)), please contact the Division of Surveillance Systems at 240-276-3464. You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Chiu S. Lin. Ph. D

Division Director

Division of Anesthesiology, General Hospital. Infection Control and Dental Devices Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

Indications for Use

510(k) Number (K):	
Device Name: Hsiner Nebulizer Bottle	
Indications for Use:	
The Hsiner Nebulizer Bottle is used to administer various aerosol treatment pediatric patients in both the homecare and hospital settings. This device use only with FDA-approved drugs upon the specific direction by a physical indicated whenever a physician or healthcare professional administers medical aerosol products to a patient using a Small Volume Nebulizer.	is intended for
Prescription Use X AND/OR Over-The-Counter U (Part 21 CFR 801 Subpart D) (21 CFR 801 Subpart Counter U	
(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTH NEEDED)	ER PAGE IF
Concurrence of CDRH, Office of Device Evaluation (ODE)	
ANN P.Fel	
(Division Sign-Off) Division of Anesthesiology, General Hospital Infection Control, Dental Devices	
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